	PA	PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004								Application or Docket Number				
										56	38	38		
	CLAIMS AS FILED - PART I						SMALL TYPE	ENTITY	- 1	00		HER T		
				(Column 1) (Column					J ——,	OR	SMA	LL E	<u> </u>	
	U.S. NATIO	NAL STAGE FEE	S				RATE		EE		RATI	: [FE	
BASIC FEE				L ENT. = \$ 150	LARGE ENT. = \$	300	BASIC FEE		500	OR	BASIC FEE			
EXAMINATION FEE			(4) =	CT Article 33(1)- \$ 50 / \$ 100	All other situations \$ 100 / \$ 200	-	EXAM FEE		00		EXAM. FEE			
	SEARCH FEE	·	ALL oth	A = \$50 / \$100 er countries = 00 / \$400	All other situations \$ 250 / \$ 500	=	SEARCH F	EE . 5	200		SEARCH F	EE- -		
F	EE FOR EXT	RA SPEC. PGS.		minus 100 =	/ 50 =		X \$ 125	=			X \$ 250	=	-	
TOTAL CHARGEABLE CLAIMS			21	minus 20 =	· (X \$ 25 =		5	OR	X \$ 50	=		
INDEPENDENT CLAIMS			2	minus 3 =	•			=		OR	X \$ 200	=		
М	ULTIPLE DEP	ENDENT CLAIM P	RESENT				+ \$ 180 :	=		OR	+ \$ 360	=		
* If the difference in column 1 is less than zero, enter "0" in column 2									$\int \mathcal{D}_{c}$	R _	TOTAL	L		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY							
AMENOMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS -PAID FO	R PRESENT SLY EXTRA		RATE	ADDI TIONA FEE	L	$\int_{-\infty}^{\infty}$	RATE	TIC	NDDI- ONAL FEE -	
	Total	•	Minus		=		X \$ 25 =		OF	₹ [>	< \$ 50 =			
AME	Independent	•	Minus	***	=		X \$ 100 =		OR	X	\$ 200 =			
	FIRST PRE	SENTATION OF M	ULTIPLE DEI	PENDENT CLA	um 🔲	1 [-	+ \$ 180 =		OR	+	\$ 360 =			
						TO	FEE		OR	τοτ	TAL ADDIT. FEE			
		(Column 1)		(Column 2	(Column 3)									
	· · · · · · · ·	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE	ADDI- TIONAL FEE		F	RATE	ADE TION FEI	AL	
	Total	-	Ainus		=	×	(\$25=		OR	X:	\$ 50 =			
1	ndependent	•	linus	***	=	×	\$ 100 =		OR	X \$	200 =			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				и <u></u>	L	\$ 180 =		OR	+\$	360 =			
		-		OR		EE.		_						
K A	ne "Highest Num ne "Highest Num	on 1 is less than the er ober Previously Paid Fo ober Previously Paid Fo oer Previously Paid Fo	or" in this spa or" in this spa	CE is less than " CE is less than "	20°, enter "20".	the appr	ropriate box in	column 1.						

FORM PTO-875 (Rev. 02/2005)

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